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CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/587,428-Conf. #8156
	Filing Date	January 31, 2005
	First Named Inventor	Johan Engström
	Art Unit	N/A
	Examiner Name	Not Yet Assigned
	Attorney Docket No.	60889/HO-P02936US1-10608643

Please change the Correspondence Address for the above-identified application to:

☒ The address associated with Customer Number:

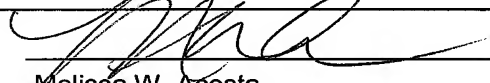
OR

<input type="checkbox"/> Firm or Individual Name					
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City		State		Zip	
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This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor
☐ Assignee of record of the entire interest.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
☒ Attorney or agent of record. Registration Number 45,872.
☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Signature		
Typed or Printed Name	Melissa W. Acosta	
Date	April 24, 2007	Telephone (214) 855-7163

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

<input type="checkbox"/> *Total of <u>1</u> forms are submitted.
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